

BEST AVAILABLE COPY

CLAIMS ONLY							SERIAL NO	FILING DATE
							APPLICANT(S)	
CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.	*	*
1	/							
2		/						
3								
4		/						
5		/						
6		/						
7		/						
8		/						
9		/						
10		/						
11		/						
12		/						
13		/						
14		/						
15	/							
16		/						
17		/						
18		/						
19		/						
20		/						
21		/						
22		/						
23		/						
24		/						
25		/						
26		/						
27		/						
28		/						
29		/						
30		/						
31		/						
32		/						
33		/						
34		/						
35		/						
36		/						
37		/						
38		/						
39		/						
40		/						
41		/						
42		/						
43		/						
44		/						
45	/							
46		/						
47		/						
48		/						
49		/						
50		/						
51								
52								
53	/							
54	/							
55	/							
56		/						
57		/						
58		/						
59		/						
60		/						
61		/						
62		/						
63		/						
64		/						
65		/						
66		/						
67		/						
68		/						
69		/						
70		/						
71		/						
72		/						
73		/						
74		/						
75		/						
76		/						
77	/							
78	/							
79	/							
80	/							
81	/							
82	/							
83	/							
84		/						
85		/						
86		/						
87		/						
88		/						
89		/						
90		/						
91	/							
92	/							
93	/							
94		/						
95		/						
96		/						
97		/						
98		/						
99		/						
100		/						
TOTAL IND.	↓		↓		↓		↓	
TOTAL DEP.	←		←		←		←	
TOTAL CLAIMS								

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

U.S. DEPARTMENT OF COMMERCE
Patent and Trademark Office

FORM PTO-2022 (1-98)

CLAIMS ONLY

SERIAL NO

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						
32						
33						
34						
35						
36						
37						
38						
39						
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	28					
TOTAL DEP.	114					
TOTAL CLAIMS	142					

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
55						
56						
57						
58						
59						
60						
61						
62						
63						
64						
65						
66						
67						
68						
69						
70						
71						
72						
73						
74						
75						
76						
77						
78						
79						
80						
81						
82						
83						
84						
85						
86						
87						
88						
89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO.	FILING DATE					
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			•		•		•	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						
2							52						
3							53						
4							54						
5							55						
6							56						
7							57						
8							58						
9							59						
10							60						
11							61						
12							62						
13							63						
14							64						
15							65						
16							66						
17							67						
18							68						
19							69						
20							70						
21							71						
22							72						
23							73						
24							74						
25							75						
26							76						
27							77						
28							78						
29							79						
30							80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.							TOTAL IND.						
TOTAL DEP.							TOTAL DEP.						
TOTAL CLAIMS							TOTAL CLAIMS						

3250 AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO		FILING DATE				
							APPLICANT(S)						
							CLAIMS						
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			•		•		•	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
101							51						
102							52						
103							53						
104							54						
105							55						
106							56						
107							57						
108							58						
109							59						
110							60						
111							61						
112							62						
113							63						
114							64						
115							65						
116							66						
117							67						
118							68						
119							69						
120							70						
121							71						
122							72						
123							73						
124							74						
125							75						
126							76						
127							77						
128							78						
129							79						
130							80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.							TOTAL IND.						
TOTAL DEP.							TOTAL DEP.						
TOTAL CLAIMS							TOTAL CLAIMS						